

# CONTRACTOR/GRANTEE ASSURANCES MADE TO THE UTAH DEPARTMENT OF HEALTH

The assurances given below are material representations of fact upon which reliance is placed in entering into Contracts or Grants with the Utah Department of Health. As the duly authorized representative of the proposed Contractor or Grantee, I certify that the legal business name and form of the proposed Contractor or Grantee is as follows (check all that apply):

Business Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_

- ☐ Local Public Procurement Unit under the Utah Procurement Code (UCA § 63-56-5)
- ☐ College or University      ☐ Indian Tribal Government      ☐ Other Governmental Entity (describe):
- ☐ Sole Proprietor/Individual      ☐ Professional Corporation
- ☐ For-profit Corporation      ☐ Non-profit Corporation (I.R.C. § 501(c)(3))
- ☐ Partnership      ☐ Limited Partnership
- ☐ Limited Liability Company      ☐ Association/Consortium (describe):

I certify that the proposed Contractor or Grantee:

1. has a federal tax identification number of \_\_\_\_\_ or a social security number of \_\_\_\_\_. That Internal Revenue Service form W-9, Request for Taxpayer Identification Number and Certification, has been completed and is attached to this document. Electronic copy of this document is available at the following web address: <http://www.irs.gov/pub/irs-pdf/fw9.pdf>
2. has the institutional, managerial, and financial capability to ensure proper planning, management, and completion of the project described in the Contract(s) or Grant(s) with the Utah Department of Health and has in place the fiscal control and accounting procedures sufficient to meet the financial reporting, accounting records, internal control, budget control, allowable cost, source documentation, and cash management requirements of the federal OMB Common Rule § 20(b)(1) through (7), or federal OMB Circular A-110, Attachment F - Standards for Financial Management Systems as cited in Table 1 depending upon the appropriate business form of the Contractor or Grantee.
3. shall comply with all applicable federal and State of Utah regulations concerning cost principles, audit requirements, and grant administration requirements, cited in Table 1, a copy of which has been provided to the proposed Contractor or Grantee and by signing this document the proposed Contractor or Grantee acknowledges receipt of these documents.

Table 1

Federal and State Principles and Requirements				
Proposed Contractor or Grantee	Cost Principles	Federal Audit Requirements	State Audit Requirements	Grant Admin. Requirements
State or Local Govt. & Indian Tribal Govts.	OMB Circular A-87	OMB Circular A-133	SLCAG	OMB Common Rule
Hospitals	45 CFR 74, App. E	OMB Circular A-133	SLCAG	OMB Common Rule or Circular A-110
College or University	OMB Circular A-21	OMB Circular A-133	SLCAG	OMB Circular A-110
Non-Profit Organization	OMB Circular A-122	OMB Circular A-133	SLCAG	OMB Circular A-110
For Profit Organization	48 CFR 31	n/a	n/a	OMB Circular A-110

a. Unless specifically exempted in the Contract's or Grant's special provisions, the proposed Contractor or Grantee must comply with applicable federal cost principles and grant administration requirements if state funds are received. If a Contract or Grant is awarded, the Contractor or Grantee shall also provide the Department with a copy of all reports required by the State Legal Compliance Audit Guide (SLCAG) as defined in Chapter 2, Title 51, UCA. A

Contractor or Grantee who receives \$100,000 or more in a year from federal, state, or local government sources may be subject to federal and State of Utah audit requirements. Copies of required audit reports shall be sent to the Utah Department of Health, Bureau of Financial Audit, Box 144002, Salt Lake City, Utah 84114-4002.

b. Federal audit requirements demand that organizations that expend \$500,000 or more in a year in federal financial assistance shall have a single or program specific audit conducted for that year. SLCAG requires the filing of financial reports with the State Auditor by all counties, cities, towns, school districts, and non-profit corporations that receive at least 50 percent of its funds from federal, state, or local government entities. The Contractor or Grantee will assure compliance with these requirements and will initiate the process by providing the following data:

1. Contractor's or Grantee's accounting year:

From \_\_\_\_\_ To \_\_\_\_\_

2. Funding projected from Federal, State, or Local governments:

Amount \$ \_\_\_\_\_ Percent of Total Revenues \_\_\_\_\_ %

3. Single Audit:

Performed last year	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Required for current year	Yes <input type="checkbox"/>	No <input type="checkbox"/>

4. Contractor's or Grantee's representative for financial matters:

Name \_\_\_\_\_

Title \_\_\_\_\_ Phone No. \_\_\_\_\_

4. \_\_\_\_\_ has established safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
5. \_\_\_\_\_ shall comply with all applicable requirements of all other laws, executive orders, regulations and policies governing this program.
6. \_\_\_\_\_ to the best knowledge and belief of the proposed Contractor or Grantee and its principals, the proposed Contractor or Grantee and its principals:
- (a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal Department or Agency;
  - (b) have not within a 3-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
  - (c) are not presently indicted or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph 6(b) of this certification; and
  - (d) have not within a 3-year period preceding this application/proposal had one or more public transactions (Federal, State, or local) terminated for cause or default.

By submitting this proposal, the proposed Contractor or Grantee agrees to include without modification the clauses contained in paragraph 6(a) through (d) with subgrantees or contractors, in all lower tier covered transactions and in all solicitations for lower tier covered transactions in accordance with 45 CFR Part 76. Should the proposed Contractor or Grantee not be able to provide this certification, an explanation, signed by the proposed Contractor or Grantee as to why certification cannot be provided, should be attached to this document.

7. \_\_\_\_\_ is in compliance with government-wide guidance on lobbying restrictions (31 U.S.C. § 1352) and that:
- a. \_\_\_\_\_ no federal funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any federal agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the awarding of any federal contract, the making of any federal grant, the making of any federal loan, the entering into of any cooperative agreement, or the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.
  - b. \_\_\_\_\_ if any funds other than federal appropriated funds have been paid or will be paid to any person for

influencing or attempting to influence an officer or employee of any federal agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with the federal contract, grant, loan, or cooperative agreement, the Contractor or Grantee shall complete and submit Federal Standard Form LLL, "Disclosure Form to report Lobbying," in accordance with its instructions.

8. has disclosed all public officers or employees who are related parties to the proposed Contractor or Grantee. As used in this paragraph, "related parties" means any person related to the proposed Contractor or Grantee by blood, marriage, partnership, common directors or officers, or 10% or greater direct or indirect ownership in a common entity. (Disclosure is to be made by attaching a separate sheet to this document listing all public officers and employees who are related parties to the proposed Contractor or Grantee.)
9. has complied with the Public Officers' and Employees' Ethics Act, § 67-16-10, UCA, which prohibits actions that may create or that are actual or potential conflicts of interest. It also provides that "no person shall induce or seek to induce any public officer or public employee to violate any of the provisions of this act."

.....  
AUTHORIZED AGENT OF PROPOSED CONTRACTOR OR GRANTEE

\_\_\_\_\_  
Signature Date

STATE OF \_\_\_\_\_ |  
COUNTY OF \_\_\_\_\_ | SS.

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, \_\_\_\_\_, personally appeared before me and executed the above certification in my presence.

\_\_\_\_\_  
NOTARY PUBLIC

Residing at: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
*If the proposed Contractor or Grantee is a corporation the following Corporate Acknowledgment must be completed.*

I, \_\_\_\_\_, certify that the following are authorized agents of \_\_\_\_\_  
(Corporate Secretary) (Name of Corporation)

and are duly authorized by authority of said corporation to sign the above assurances and the Contract or Grant on behalf of the corporation.

\_\_\_\_\_  
(Authorized Agent of Corporation \*\*) Title

\_\_\_\_\_  
(Authorized Agent of Corporation \*\*) Title

\_\_\_\_\_  
Corporate Secretary Signature date

\*\* (Note: authorized agent of Corporation must not be Corporate Secretary)

CORPORATION SEAL